PART B -FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: <u>Mail</u>

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the		
86110 WOLF, GREENFIELD & SACKS, P.C. 600 Atlantic Avenue Boston, Massachusetts 02210-2206					Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
					Angela	n M. Griffith	(Depositor's name)
					/Angel	a M. Griffith/	(Signature)
					Septen	nber 6, 2011	(Date)
APPLICATION NO.	APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO	O. CONFIRMATION NO.
10/587,156	05/16/2007	Vince		ent Linder		H0498.70219US02	4991
TITLE OF INVENTIO	N: FLUID DELIVE	RY SYSTEM A	AND METH	OD			
APPLN. TYPE	SMALL ENTITY	ISSUE	FEE	PUBLICA	ATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	yes	\$755.00		\$3	00.00	\$1,055.00	09/06/2011
EXAMINER		ART U	ART UNIT		SUBCLASS		
N. C. 1. Change of correspon	1		ent front page, l				
Correspondence "Fee Address" if form PTO/SB/4 Use of a Custor 3. ASSIGNEE NAME PLEASE NOTE: Unl for recordation as set (A) NAME OF ASSIG President and Fellow	respondence address (or e Address form PTO/SB/1 indication (or "Fee Address i-7; Rev 03-02 or more recomer Number is required AND RESIDENCE DATA less an assignee is identification forth in 37 CFR 3.11. Con	22) attached. as" Indication ent) attached. A TO BE PRIN ed below, no as enpletion of this	attorneys or (2) the nam a registered up to 2 regi name is liste ITED ON TH signee data v of form is NO	r agents OR, a e of a single I attorney or istered patent ed, no name v HE PATENT will appear or T a substitute B) RESIDEN Cambridge	firm (having as agent) and the attorneys or ag will be printed. (print or type) a the patent. If a for filing an as	a member 2 names of ents. If no 3 nassignee is identified belosignment.	w, the document has been filed ue group entity Government
4a. The following fee(s	a) are enclosed:		4b.	Payment of I	ee(s):		
X Issue Fee	A check in the amount of the fee(s) is enclosed.						
	(No small entity discount	permitted)	X Paym	ent by credit	card. Form PT	O-2038 is attached:	
Advance Order	-# of Copies			Director is he sit Account N	•	by charge the required fee(s), or credit any overpayment, to
5. Change in Entity St	tatus (from status indicate	d above)	_	_			
a. Applicant cla	ims SMALL ENTITY sta	tus. See 37 CFI	R 1.27.	b. Applic	ant is no longe	r claiming SMALL ENTITY	status. See 37 CFR 1.27(g)(2).
NOTE: The Issue Fee and	1 11.5	d) will not be ac	cepted from a		11 0 0 1	viously paid issue fee to the ap nt; a registered attorney or age	oplication identified above. ent; or the assignee or other party in
Authorized Signatu	re	/Jessamine Lee/				Date S	September 6, 2011
Typed or printed na	ıme	Jessamine N. Lee, Ph.D.				Registration No.	61 674